2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V71221

Entity Name: SOUTHEAST PERINATAL ASSOCIATES, INC.

FILED
Jun 30, 2020
Secretary of State
3488278405CC

Current Principal Place of Business:

7700 WEST SUNRISE BOULEVARD MAILSTOP PL-6

PLANTATION, FL 33322

Current Mailing Address:

7700 WEST SUNRISE BOULEVARD MAILSTOP PL-6 PLANTATION, FL 33322 US

FEI Number: 65-0363303 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT, DIRECTOR Title EXECUTIVE VICE PRESIDENT, CFO

Name SMITH, M.D., DOUGLAS Name SPARKS, TERESA

Address 7700 WEST SUNRISE BOULEVARD Address 7700 WEST SUNRISE BOULEVARD

MAILSTOP PL-6 MAILSTOP PL-6

City-State-Zip: PLANTATION FL 33322 City-State-Zip: PLANTATION FL 33322

Title SENIOR VICE PRESIDENT CLINICAL Title SECRETARY, SENIOR VICE

Name DROZDOW, GILBERT PRESIDENT

Name WILSON, CRAIG

Address 7700 WEST SUNRISE BOULEVARD

MAILSTOP PL-6

Address

7700 WEST SUNRISE BOULEVARD

PLANTATION FL 33322 MAILSTOP PL-6

City-State-Zip: PLANTATION FL 33322

Title TREASURER

City-State-Zip:

Name RUTHERFORD, KRISTY

Address 7700 WEST SUNRISE BOULEVARD

MAILSTOP PL-6

City-State-Zip: PLANTATION FL 33322

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CRAIG A. WILSON SECRETARY 06/30/2020